

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:  
Yoshifumi TANIMOTO  
Serial No: 10/045,698  
Confirmation No.: 9845  
Filed: January 10, 2002  
For: Relay Server, Communication System  
and Facsimile System

Art Unit: 2157  
Examiner: Burgess, Barbara N.

I hereby certify that this correspondence  
is being transmitted via electronic filing  
to:

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

July 2, 2007

Date of Deposit

Juanita Soberanis

Name

*Juanita Soberanis* 7/2/2007  
Signature Date

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

- ☒ Reply and Request for Reconsideration under 37 CFR 1.116.  
☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	21	-	21**	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	4	-	5***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS			\$ 0
Independent Claims: 1, 2, 8 and 17							TOTAL \$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the amount of \$\_\_\_ to cover the additional claims fee to Deposit Account No. 50-1314.  
☐ Please charge the amount of \$\_\_\_ to cover the extension fee to Deposit Account No. 50-1314.  
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.  
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.  
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

Date: July 2, 2007

1999 Avenue of the Stars, Suite 1400  
Los Angeles, California 90067  
Telephone: 310-785-4600  
Facsimile: 310-785-4601

By: *Troy M. Schmelzer*  
Troy M. Schmelzer  
Registration No. 36,667  
Attorney for Applicant(s)